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City of Boston
Minority, Women, Small and Local
Business Enterprise
Application

Small and Local Business Enterprise Office
Boston City Hall, Room 717, Boston, MA 02201
Telephone: (617) 635-4084

Complete all items. If an
item does not apply, mark
"N/A."

Application is hereby made by the organization identified below for certification as a Small, Small Local, Minority or Woman Business Enterprise under the City of Boston Small and Local Business Enterprise Program. **Check all that apply.**

Firm is applying as a ☐ Small Business Enterprise (SBE) ☐ Small Local Business Enterprise (SLBE)
☐ Minority Business Enterprise (MBE) ☐ Woman Business Enterprise (WBE)

1. Name & Address:
(Co. Name, Street Address, City, State, Zip)

Owner _____

Telephone # () _____

Fax # () _____

Email: _____

2. Type of ownership:

☐ Corporation

☐ Sole Proprietorship

☐ Partnership

☐ Joint Venture

☐ Other

Specify _____

3. Federal Identification Number

4. Business type:

Construction (describe) _____

Supplier _____ Professional Services

Distributor _____ Dealership

Other (describe) _____

5. Date established _____

Gross receipts for each of the last 3 years in business:

6. List all products and/or services rendered:

7. Does your company have an affiliation with any other company? ☐ Yes ☐ No

If "Yes", please provide the following information:

Affiliate name(s) and/or owner(s): _____

Business address: _____

Business telephone number: _____

8. Is your company certified by: ☐ SOMWBA ☐ SBA8(a) ☐ Other (describe) _____

9. The following information is optional, and will be used for informational purposes only.

Controlling interest:

☐ Asian

☐ Cape Verdean

☐ Native American

☐ Woman

☐ Black

☐ Hispanic

☐ White

☐ Other

% of Minority ownership _____%

% of Woman ownership _____%

If you are applying for Small or Small Local Business Enterprise certification, please proceed to question 13.

If you are applying for Minority or Woman Business Enterprise certification, please continue with question 10.

10. How was business started or acquired? (Include source of financing.) If personal or institutional loan was taken out, please answer below:

Name of Lender _____

Date of Loan Agreement _____

Terms of Repayment _____

11. Who is responsible for the following:

	Name	Minority or Woman	Title
a.	Surety and/or Performance Bonds		
b.	Insurance		
c.	Payroll		
d.	Job Supervision		
e.	Hiring & Firing		
f.	Inventory		
g.	Financial Decisions		
h.	Seeking and Negotiating Contracts		
i.	Management Decisions		
j.	Accepting and Rejecting Bids		

12. If a Corporation:

a. List Shareholders

Name	Minority or Woman	Class Common or Preferred	No. of Shares	Total Cost	Date of Ownership

Total number of shares outstanding: Common: _____ Preferred: _____

b. If your firm is owned in whole or in part by another company, list on a separate sheet that company's shareholders. Include percentage of ownership interest and the names and addresses of directors and officers. Use the same format as 12a above listing total number of shares outstanding, names and addresses of shareholders.

c. List all agreements which restrict voting rights of minority/woman pursuant to the corporation by-laws or articles of incorporation or otherwise.

d. List the names and addresses of the officers of the company.

Name and Address	Minority or Woman	Date Elected/Appointed
President		
Vice-President		
Secretary		
Treasurer		
Other		

e. List current Board of Directors

Name and Address	Minority or Woman	Date Elected/Appointed

12 continued...

f. List names of investors in the company other than shareholders:

Type of investment: _____ Amount: _____ Date: _____

13. If a Supplier:

a. What is the estimated average value of inventory held on property owned or leased during the period of one month?

\$ _____

b. Please attach documentation for warehouse/storage facility; product line; distribution equipment leased or owned.

c. Describe the type of insurance of the company including but not limited to: Workmen's Compensation, General Liability, Unemployment Insurance.

d. If applicable, what is the capacity of your performance bonding for supply contracts with customers?

14. a. Work History, Construction Companies

List last five jobs completed or on-going. Use additional sheets if necessary.

Project Name (List awarding Department if public agency)	Architect, Owner or General Contractor (Indicate address and and telephone number)	Your Co.'s Contract Price	Your Co.'s Start Date	Your Co.'s End Date or % Completed	Your Co.'s Bond Amount

b. Work History, Goods and Services Vendors:

List five (5) recent customers.

15. Documents Checklist

Company Name: _____

For **ALL APPLICANTS**

- _____a. Application
- _____b. Federal Tax Return (Form 1120, 1120S for corporations; 1065 for partnerships, or 1040 for sole proprietorships) for the last three (3) years or for those years in business if less than three (3) years, include all schedules
- _____c. Current or most recent financial statement including balance sheet and income statement (if less than one year in business, submit opening balance sheet and income statement for those months in business)
- _____d. Lease/rental agreement(s) for space and equipment
- _____e. Five cancelled checks written for business purposes

For **MINORITY OR WOMAN APPLICANTS**

- _____a. Bank signature card reflecting who signs checks and loans
- _____b. Current resumes of principals showing education, training, and employment experience with dates
- _____c. Documentation of initial investment by applicant showing source(s) of start-up capital. Please submit copies of canceled checks
- _____d. Documentation of ethnicity (for Minority applicants)

For a **SOLE PROPRIETORSHIP**

- _____a. Business Certificate from your local City Clerk's Office

For a **CORPORATION**

- _____a. Articles of Incorporation and all amendments thereto
- _____b. Corporation By-Laws and amendments thereto
- _____c. Minutes of first corporate organizational meeting
- _____d. Copy of stock certificate(s) issued, both sides, not specimen copy

For a **PARTNERSHIP**

- _____a. Partnership agreement, including buy-out rights and profit sharing agreement

For a **NON-PROFIT**

- _____a. Federal Tax Exempt Form 501 c(3) or c(4)
- _____b. Articles of incorporation and all amendments thereto
- _____c. List of Board of Directors/Trustees and ethnic/gender affiliation of each Board/Trustee member

16. Small, Small Local, Minority or Woman Business Certification by owner(s) or principals:

I hereby certify that _____
Print Full Name of Business

is a Small, Small Local, Minority, or Woman Business Enterprise as defined below.

- a. Small Business Enterprise (SBE) means an independent business with gross receipts, when averaged over a three-year period, do not exceed gross income limitations for that particular industry as defined by the Small Local Business Enterprise Office.
 - b. Small Local Business Enterprise (SLBE) means an independent business which is a Small Business Enterprise, as defined above, and whose principal office is physically located in the City of Boston, as defined by the SLBE certification regulations issued pursuant thereto.
 - c. Minority Business Enterprise (MBE) means a business organization which is beneficially owned by one or more minority group members as follows:
 - i. The business must be at least 51% beneficially owned by minority group members.
 - ii. The minority owners must demonstrate that they have control over management.
 - iii. The firm has not been solely established for the purpose of taking advantage of a special program which has been developed to assist minority-owned businesses.
 - d. Woman Business Enterprise (WBE) means an independent business organization which is beneficially owned by one or more woman as follows:
 - i. The business must be at least 51% beneficially owned by a woman.
 - ii. The woman owner must demonstrate that she has control over management.
 - iii. The firm has not been solely established for the purpose of taking advantage of a special program which has been developed to assist woman-owned businesses.
 - e. Beneficial owner and control shall be indicated by at least the following where applicable to the particular form of business organization:
 - i. Ownership of each class of stock.
 - ii. Unrestricted voting rights.
 - iii. Right to receive profits and all other benefits attached to ownership.
 - iv. Evidence of majority participation in the management of the enterprise.
- The Small and Local Business Enterprise Office reserves the right to deem the existence of any agreements, options, rights of conversion, or other restraints which may be exercised within three years, and which, if exercised, could reduce minority or woman ownership or control to less than the requisite percentage, to be grounds for rejection of the existing enterprise as a small, small local, minority or woman business enterprise.
- f. Minority means a citizen of or permanent resident of the United States who is Asian (including persons who have origins in any of the original peoples of the sub-continent of India), Black, Cape Verdean, Native American, or Hispanic.
 - g. Woman means an adult female person.

Under pains and penalties of perjury, I swear that the above information contained in this application is true, complete and accurate.

I acknowledge that the City of Boston Small and Local Business Enterprise Office reserves the right to request additional information at any given time regarding certification.

Sign: _____

Print: _____

Title: _____

Date: _____